UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK	
In re: ILIYA HONOVICH,	Case No. 1-17-41789-ess
	Chapter 13
Debtor(s)	
AFFIDAVIT PURSUANT TO LOC	AL RULE 1007-1(b)
, undersigned	debtor herein, swears as follows:
1. Debtor filed a petition under chapter 13 of the Bankruptcy C	Code on April 13, 2017
2. Schedule(s) 1&J were not filed at the time of filing of	the said petition, and is/are being filed herewith.
3. [Check applicable box]:	
✓ The schedules filed herewith reflect no additions or correct accompanied the petition.	ctions to, or deletions from, list of creditors which
Annexed hereto is a listing of names and addresses of sche creditors which accompanied the petition. Also listed, as a previously listed names and/or addresses have been correction) is indicated for each creditor listed.	applicable, are any scheduled creditors whose
1. [If creditors have been <i>added</i>] An amended mailing matrix is a format prescribed by E.D.N.Y LBR 1007-3.	annexed hereto, listed added creditors ONLY, in the
Reminder: No amendment of schedules is effective until proof of $I(b)$ has been filed with the Court.	service in accordance with E.D.N.Y LBR 1009-
Any additions to the list of creditors which accompanied the petition amendment is filed prior to the expiration of the time period set for deemed to constitute a motion for a 30-day extension of the time we object to the discharge of the debtor and/or to determine discharge a hearing if no objection is filed with the Court and served on debt service of this affirmation, all attachments and the amended schedule.	rth in Fed. R. Bankr. P. 4004 and 4007, it will be within any added creditors may file a complaint to ability. The motion will be deemed granted without for within 14 days following filing of proof of ules in accordance with E.D.N.Y LBR 1009-1.
Dated: June 20, 2017	S/ Iliyo Honouich Debtor (signature)

Rev. 12/16

Fill	in this information to ident	ify your ca	se:								
Det	otor 1 Iliya	Honovio	:h			_					
	otor 2 use, if filing)										
Uni	ted States Bankruptcy Cou	urt for the:	EASTERN DISTRICT	OF NEW YORK		_					
Cas	se number 1-17-417	89-ess		_			Cł	eck if this is	:		
(If kr	nown)							An amende	•		
		-								ng postpetitior following date:	
0	fficial Form 106	<u>31</u>						MM / DD/ Y	/YYY		
S	chedule I: You	r Inco	ome								12/1
atta	use. If you are separated ch a separate sheet to the	is form. (spouse is not filing wi	ith you, do not in onal pages, write	clude inforr your name	nation and	on abe	out your sp	ouse. If m known).	ore space is Answer every	needed, question
1.	Fill in your employmen information.	ıt		Debtor 1				Debtor	2 or non-	filing spouse	·
	If you have more than or		Employment status	■ Employed				■ Employed			
	information about addition	tach a separate page with formation about additional		☐ Not employed				☐ Not employed			
employers.			Occupation	Food Manager				Food Bartender			
	Include part-time, season self-employed work.	nal, or	Employer's name	Ford Fusion	Bar & Gril	LLC		Ford F	usion Ba	ar & Grill LL	С
	Occupation may include or homemaker, if it applied		Employer's address	737 West Ma Endicott, NY					est Main tt, NY 1:		
			How long employed the	here? 1 ye	ar				l year		
Par	t 2: Give Details A	bout Mon	thly Income								
Esti spou	mate monthly income as use unless you are separa	of the dated.	te you file this form. If y	you have nothing	to report for	any	line, w	rite \$0 in the	space. Ir	nclude your no	n-filing
lf yo more	u or your non-filing spouse e space, attach a separate	e have mo e sheet to t	re than one employer, co	ombine the informa	ation for all e	emple	oyers	for that pers	on on the	lines below. If	you need
							For	Debtor 1		ebtor 2 or ling spouse	-
2.	List monthly gross way deductions). If not paid	ges, salar monthly, c	y, and commissions (be alculate what the monthl	efore all payroll ly wage would be.	2.	\$		0.00	\$	845.00	-
3.	Estimate and list mont	hly overti	me pay.		3.	+\$		0.00	+\$	0.00	-
4.	Calculate gross Incom-	e. Add lin	e 2 + line 3.		4.	\$		0.00	\$_	845.00	

Official Form 106I Schedule I: Your Income page 1

Debto	r 1	Iliya Honovich	-	Case	number (if known)	1-17-41	789-ess	
					Debtor 1	non-fil	btor 2 or ing spouse	
	Cop	by line 4 here	4.	\$_	0.00	\$	845.00	
5.	List	all payroll deductions:						
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$_ \$	0.00	\$	141.74 0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	0.00	
	5g.	Union dues	5g.	\$_	0.00	. \$	0.00	
	5h.	Other deductions. Specify:	5h	+ \$_		+ \$	0.00	
		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	141.74	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ _	0.00	\$	703.26	
	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$_	7,300.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$-	0.00	<u>*</u> —	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h	+ \$_	0.00	+ \$	0.00	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	7,300.00	\$	0.00	
		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		7,300.00 + \$	703	s.26 = \$ <u>8</u>	3,003.26
	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your rier friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	deper				edule J. 11. +\$	0.00
	Add Writ	I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies	ult is t in Liab	he cor ilities a	nbined monthly in and Related <i>Data</i>	ncome. a, if it		3,003.26
13.	Do :	you expect an increase or decrease within the year after you file this form	?				Combine monthly	
		No.						
		Yes. Explain:						

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:				
Det	btor 1 Iliya Honovich		Che	ck if this is:	
Dok				An amended filing	ing postpotition chapter
	btor 2			13 expenses as of t	ing postpetition chapter he following date:
Uni	ited States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YC	DRK		MM / DD / YYYY	
	se number				
0	fficial Form 106J				
	chedule J: Your Expenses				12/15
inf	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this fumber (if known). Answer every question.	e filing together, bot form. On the top of a	th are equ any addition	ally responsible for onal pages, write yo	r supplying correct our name and case
Pai	rt 1: Describe Your Household				
1.	Is this a joint case?				
	■ No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household? ☐ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i> :	for Separate Househ	old of Deb	tor 2.	
2.	Do you have dependents? ■ No				
۷.	Do not list Debtor 1 and	Dependent's relatio	nship to	Dependent's	Does dependent
	Debtor 2. each dependent	Debtor 1 or Debtor		age	live with you?
	Do not state the				□ No
	dependents names.	*****			☐ Yes ☐ No
					☐ Yes
			-		□ No
					☐Yes
					□ No
					□Yes
3.	Do your expenses include No				
	expenses of people other than yourself and your dependents?				
	Total Varia Organia Hanthir Evanges				
Est	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you penses as of a date after the bankruptcy is filed. If this is a suppliplicable date.	ou are using this for lemental Schedule	rm as a su J, check th	pplement in a Cha ne box at the top of	pter 13 case to report the form and fill in the
Inc	clude expenses paid for with non-cash government assistance if	you know			
the	e value of such assistance and have included it on <i>Schedule I: Yo</i> fficial Form 106l.)	our Income	市 技術	Your expe	nses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	oclude first mortgage	4. \$	S	0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	3	250.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		120.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		75.00
_	4d. Homeowner's association or condominium dues	no oquity loops	4d. \$		0.00
5.	Additional mortgage payments for your residence, such as hon	ne equity loans	D. 3	,	0.00

Official Form 106J Schedule J: Your Expenses page 1

Debte	or 1 Iliya Honovich	Case num	ber (if known)	1-17-41789-ess
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	150.00
	6b. Water, sewer, garbage collection	6b.	\$	40.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	220.00
	6d. Other Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	217.00
	Childcare and children's education costs	8.	\$	0.00
	Clothing, laundry, and dry cleaning	9.	\$	100.00
	Personal care products and services	10.	\$	107.00
11.	Medical and dental expenses	11.	\$	50.00
12.	Transportation. Include gas, maintenance, bus or train fare			405.00
	Do not include car payments.	12.	·	425.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	·	217.00
14.	Charitable contributions and religious donations	14.	\$	0.00
	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.	45-	¢	0.00
	15a. Life insurance	15a.		0.00
	15b. Health insurance	15b.	·	0.00
	15c. Vehicle insurance	15c.	· -	150.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	c	0.00
	Specify:		Ф	0.00
	Installment or lease payments: 17a. Car payments for Vehicle 1	17a.	\$	0.00
	17a. Car payments for Vehicle 2	17b.	· -	0.00
		176. 17c.	· ——	0.00
	17c. Other Specify:	17d. 17d.	·	0.00
	17d. Other. Specify: Your payments of alimony, maintenance, and support that you did not report a		Ψ	0.00
	deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
19.	Other payments you make to support others who do not live with you.	•	\$	0.00
	Specify:	19.		
	Other real property expenses not included in lines 4 or 5 of this form or on Sch	nedule I: Yo	ur Income.	
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00
21.	Other: Specify: Mortgage for 30-21 Brighton 7th Street	21.	+\$	2,850.00
	Calculate your monthly expenses		_	4.074.00
	22a. Add lines 4 through 21.		\$	4,971.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,971.00
23	Calculate your monthly net income			
	Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	8,003.26
	23b. Copy your monthly expenses from line 22c above.	23b.	·	4,971.00
	ZOD. COPY YOUR INITIALITY EXPENSES ITOM INTO ZZO ADOVE.	250.		4,3/1.00
	23c. Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	3,032.26
	•			
24.	Do you expect an increase or decrease in your expenses within the year after y	you file this	form?	
	For example, do you expect to finish paying for your car loan within the year or do you expect yo	ur mortgage	payment to incre	ease or decrease because of a
	modification to the terms of your mortgage?			
	■ No.			
	☐ Yes. Explain here:			